FINANCIAL STATUS REPORT

(Long Form)



(Follow instructions on the back)

	Federal Agency and Organizational Element 2. Federal Grant or Other Identifying Number Assigned by Federal Agency			ed	OMB Approval	Page	of
1	sistance Commission	By Federal Agency Title II, 251	icy			1	1
Recipient Organiz	zation (Name and complete a	address, including ZIP code)					pages
Idaho Secretary	of State, PO Box 837	20, Boise, Idaho, 83720					
Employer Identific	cation Number	5. Recipient Account Number	er or Identifying Number	6. Final Report	7. Basis		
		CDFA# 90.401	or identifying Number	Yes No	Cash Accrual		ıai
8. Funding/Grant Period (See instructions)			9. Period Covered by this Report				
From: (Month, Day, Year) 6/18/2004 To: (Month, Day, Year)			From: (Month, Day, Year) 6/18/2004		To: (Month, Day, Year) 9/30/2004		
10. Transactions:			0/10/2004		9/30/2004		
			Previously Reported	This Period	Cumulative		
a. Total outlays			0.00	718,618.00	718,618.00		
b. Refunds, rebates, etc.							0.00
c. Program income used in accordance with the deduction alternative					<u>S</u>	_ <u>;</u> _	
					Const	<u></u>	0.00
d. Net outlays (Line a, less the sum of lines b and c)			0.00	718,618.00	Comment Company Compan	718,6	18.00
Recipient's share o	of net outlays, consisting o	i de digitalista de la composição de la co Fe				.≪. .≪.	
e. Third party (i	n-kind) contributions				### P	글었	0.00
f. Other Federa	al awards authorized to be use	ed to match this award			# d	STANC	0.00
	ome used in accordance with	the matching or cost			<u> </u>	- ਨੂੰ ਨੂੰ	0.00
sharing alterr h. All other recip	native Dient outlays not shown on line	es e, f or g					0.00
				354,295.00		354,2	95.00
i. Total recipien	nt share of net outlays (Sum o	r lines e, r, g and n)	0.00	354,295.00	;	354,29	95.00
j. Federal share	e of net outlays (line d less lin	AND THE REPORT OF THE PROPERTY				\$63.762.1/ <u>\$</u>	
k. Total unliquid	lated obligations		0.00	364,323.00		364,3	23.00
it. Poter uniquic	rated obligations						
I. Recipient's si	hare of unliquidated obligation	ns					
m. Federal sha	re of unliquidated obligations						
n. Total Federal	share (sum of lines j and m)						
						364,32	23.00
o. I otal Federal	I funds authorized for this fund	ling period			11,695,506.00		
p. Unobligated l	balance of Federal funds (Lin	e o minus line n)			11 '	331,18	83 00
BARRONE SARATE	Barry Commence Washington				11,*	301,10	33.00
Program income, c q. Disbursed pro	onsisting of: ogram income shown on lines	s c and/or g above					0.00
r. Disbursed program income using the addition alternative							
s. Undisbursed program income							
t. Total progran	n income realized (Sum of line	es q, r and s)					0.00
	a. Type of Rate (Place "X"			No. 2 March 1 of Salar S			
11. Indirect Expense	b. Rate	c. Base	termined d. Total Amount	☐ Final	Fixed		
'	7,000	V. Dass	d. Potat Amount	e. F	ederal Share		
12. Remarks: Attac	ch any explanations deemed	necessary or information requi	red by Federal sponsorin	g agency in compliance	with		
governing legis		ive interest - \$09 702 St	ata Matab - \$222 de	00 Cinto on the late			
MOE for FY end	ding 6-30-2004 = \$206	ive interest = \$98,703. St ,200. For FY ending 6-30	ate Match = \$333,13)-2005 = \$187,193	23. State match inte	erest = \$21,11	72.	
13. Certification:	certify to the best of my kn	owledge and belief that this re	port is correct and con	nplete and that all outla	ys and		
Typed or Printed Nam		for the purposes set forth in t	he award documents.	Telephone (Area codo -	number and out-	neion'	
- •	Deputy Secretary of S	tate		Telephone (Area code, number and extension) 208-334-2852			
Signature of Authorized Certifying Official				Date Report Submitted			
1 Semator Tent				January 25, 2007			
Previous Edition Usal	ble /	269-10			Standard Form 26		

Standard Form 269 (Rev. 7-97)

Previous Edition Usable NSN 7540-01-012-4285